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CONFIRMATION NO. 8191

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/825,866	04/16/2004	604	3767	CV/04-001
RULE				

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** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **
 06/26/2004

Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		PA	37	82	6
Verified and /ELIZABETH MACNEILL/ Acknowledged Examiner's Signature	Initials				

ADDRESS

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TITLE

Fluid delivery system having a fluid level sensor and a fluid control device for isolating a patient from a pump device

- ☐ All Fees
☐ 1.16 Fees (Filing)

FILING FEE RECEIVED 5020	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
		<input type="checkbox"/> 1.18 Fees (Issue)
		<input type="checkbox"/> Other _____
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